FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9500063190

1. Corporation Name

GANDY LAUNDRY, INC.

Principal Place of Business

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90124 018 ***150.00



Principal Place	e or Business	Mailing Address			
4713 HESPERID	DES ST.	4713 HESPERIDES ST.			
TAMPA FL 3361	14	TAMPA FL 33614		· DO NOT WRITE	IN THIS SPACE
					THE SPACE
				3. Date incorporated or Qualifed	
				08/15/1995	
2. Principal Pl	lace of Business	2a. Mailing Address	liveli St.	4. FEI Number	Applied For
21 740	22 N. Church St.		rueu St.	59-3332232	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	_ η	27 Γ[Fee Required
City & Stat	£ +1	City & State	Γ/	6. Election Campaign Financing	\$5.00 May Be
23	diupa H	28 ampa	<u> </u>	Trust Fund Contribution	Added to Fees
Zip	Country	Zip 7.26 116	Country	8. This corporation owes the current	
<u>24 SS</u>	<u>[614 25 </u>	29 5 <i>56/7</i> 30	<u> </u>	Personal Property Tax.	Yes □No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	istered Agent
			81 Name	James Marly	
	ILEY, JAMES F		82 Street A	ddress (R.O. Box Number & Not Agceptable	e)
4713 HESPERIDES ST.			1-1 44	22 N. Church St. H.	<i>,</i>
TAMPA FL 33614			83		
			84 City	Tour	FL 85 Zip Code 776/4
11 Durcuant	to the provisions of Sections 607 0502	2 and 607 1508 Florida Statutes	the above-named c	orporation submits this statement for the pu	roose of changing its registered
office or n	egistered agent, or both, in the State of	of Florida. Such change was auth	iorized by the corpor	ration's board of directors. I hereby accept the	he appointment as registered
agent. I a	m familiar with, and accept the obligati	ons of, Sedtion 607.0505, Florida	a Statutes.	•	\linka
SIGNATURE	ames	Whitey	egistered Agent signature rec		2 18149
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	P OFFICERS AND	DELETE	1,1 TITLE	Pracitivat .	☐ Change Addition
	l '	D		James Marty 4422 N. Church St.	_
NAME	MANLEY, JAMES F		1.2 NAME	14 (127 A) / hourst	
STREET ADDRESS	421 ROYAL POINCIONA DR.		13 STREET ADDRESS	44 10 10 00	
CITY-ST-ZIP	TAMPA FL 33609		14 CITY-ST-ZIP	Tampa F1 35614	☐ Change ☐ Addition
TITLE		☐ DELETE	2.1 TITLE	•	☐ Change ☐ Addition
NAME			2.2 NAME	,	}
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	راجوي ووالا المناف المسواء المناو	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ļ
CITY-ST-ZIP			3.4. CfTY-ST-ZIP	i	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
			1		
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 51 TITLE		Change Addition
TITLE		_ DELETE	5.2 NAME	•	
NAME			B		
STREET ADDRESS		İ	E 2 CTOEET ADDRESS		
			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		Change Addition
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
		☐ DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: